No. W 120247	Due no later than Dec 31, 2016		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		TO A CONTROL OF THE PARTY OF TH	JEREMY THOMPSON			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed. STELLAR PAINTLESS DENT REPAIR, LLC JEREMY THOMPSON 1726 AVALON ST		GENERAL DE RESIDENT DE PERSONAL DE DEC	1726 AVALON ST IDAHO FALLS ID 83402			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			IDANO FALLS				
	IDAHO FALLS ID 83402		3. <u>New</u> Registere	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER JEREMY L THOMPSON		1726 AVALON ST	IDAHO FALLS	ID	USA	83402	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	ID Signature: Jeremy Thompson			Date: 11/10/2016			
W 120247	Name (type or		Title: Owner				
Processed 11/10/2016	* Electronically provided signatures are accepted as original signatures.						